



this notice and must be completed.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

SEC USE ONLY											
Prefix		Serial									
DAT	E RECEI	VED									

Name of Offering (check if this is	s an amendment and name has changed, and indicate change.) Lazarus Investment Partner	rs LLLP offering of limited partnership interests
Filing Under (Check box(es) that Type of Filing: [] New Filing [	11.77	
	A. BASIC IDENTIFICATION DATA	
Enter the information requests	ed about the Issuer	
Name of Issuer (check if this is a Lazarus Investment Partners L	an amendment and name has changed, and indicate change.) LLLP	- 04008610
Address of Executive Offices 2401 East Second Avenue, Su Denver, Colorado 80206	(Number and Street, City, State, Zip Code) Telephone Number (Including Area Code ite 400 (303) 302-9035	e)
Address of Principal Business O (if different from Executive Office Same	Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area es)	Code)
Brief Description of Business Partnership will make open mark	ket investments in ultra-small microcap public companies with market capitalizations of \$140	million or less.
Type of Business Organization		PROCESSED
[ ] corporation	[ ] limited partnership, already formed [X] other (limited liability limited partnership, to be formed):	FEB 19 2004
Actual or Estimated Date of Inco Jurisdiction of Incorporation or C	Month Year  orporation or Organization: [ 03 ] [2003] [ X] Actual [ ] Estimated  Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction) [ D ][ E ]	FINANCIAL
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an	offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et se	q. or 15 U.S.C. 77d(6).
	no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Sec the address given below or, if received at that address after the date on which it is due, on the date it was ma	
Where to File: U.S. Securities and Ex	change Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of the typed or printed signatures.	his notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed	d must be photocopies of manually signed copy or bear
	ust contain all information requested. Amendments need only report the name of the issuer and offering, any tation previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.	changes thereto, the information requested in Part C, and
Filing Fee: There is no federal filing fe	96.	
State: This notice shall be used to indicate r	reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have a	dopted ULOE and that have adopted this form. Issuers

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relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

			A. BASIC IDE	NTIFICATION DATA	
<ul> <li>Each benef</li> <li>Each execu</li> </ul>	oter of the issuer, if the icial owner having the	issuer has been of power to vote or or r of corporate issu	lispose, or direct the lers and of corporate	vote or disposition of	f, 10% or more of a class of equity securities of the Issuer; ing partners of partnership issuers; and
Check Box(es) that Apply:	[X] Promoter [X]		[X] Executive Officer	[] Director [X]	General and/or Managing Partner
Full Name (Last name	first, if individual) Baris	sh, Michael S.			
Business or Residence	Address (Number and	Street, City, Stat	e, Zip Code): <b>2401 E</b>	ast Second Avenue	s, Sulte 400, Denver, CO 80206
Check Box(es) that Apply:	[X] Promoter [X]	Beneficial Owner	[X] Executive Officer	[] Director [X]	General and/or Managing Partner
Full Name (Last name	first, if individual): Born	us, Justin B.			
Business or Residence	Address (Number and	Street, City, Stat	e, Zip Code): <b>2401 E</b>	East Second Avenue	e, Sulte 400, Denver, CO 80206
Check Box(es) that Apply:	[X] Promoter [X]	Beneficial Owner	[X] Executive Officer	[ ] Director [X]	General and/or Managing Partner
Full Name (Last name	first, if individual): Laza	arus Managemen	t Company LLC		
Business or Residence	Address (Number and	d Street, City, Stat	e, Zip Code): <b>2401 E</b>	ast Second Avenue	e, Sulte 400, Denver, CO 80206
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[ ] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if Individual):				
Business or Residence	Address (Number and	Street, City, Stat	e, Zip Code):		
Check Box(es) that Apply:	[ ] Promoter [ ]	Beneficial Owner	[ ] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual):				
Business or Residence	Address (Number and	d Street, City, Stat	e, Zip Code):		
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[ ] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual):				
Business or Residence	Address (Number and	d Street, City, Stat	e, Zip Code):		
Check Box(es) that Apply:	[] Promoter []	Beneficial Owner	[ ] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual):				
Business or Residence	Address (Number and	d Street, City, Stat	e, Zip Code):		

							B. IN	IFORMAT	TION ABO	UT OFF	ERING				
1. Has	the issue	er sold, o	r does the	issuer in	tend to se	all, to non-	-accredite	d investor	s in this of	fering?	••••			Yes	No f X 1
					,	Answer al	so in App	endix. Coi	lumn 2. lf t	filina und	er ULOE.				( ~ )
2. Wha	it is the m	ninimum i	investmer	nt that will						-				\$ 100,000	
3. Doe	s the offe	ring pern	nit joint ov	wnership	of a single	unit?								Yes	No
4. Ente	r the info	rmation i	requested	i for each	person w	no has be	en or will	be paid o	r alven, di	rectly or	indirectiy, an	y commission or si	milar	[ X ]	[ ]
person than fiv	or agent e (5) per	of a brol	ker or dea	aler regist	ered with	the SEC :	and/or wit	h a state d	or states, I	ist the na	ame of the br	oker or dealer. If m	ore		
Full Na	ıme (Lasi	name fir	st, if Indiv	ridual) N	/A										······································
Busine	ss or Res	sidence A	Address (I	Number a	ind Street	, City, Sta	te, Zip Co	ode)							
Name	of Associ	iated Bro	ker or De	aler											
							cit Purcha	sers		r	1 All States				
•							וחבו	(DC)	7513	[CA]	-	(ID)			
												-			
				• •				•							
[RI]	[SC]	[SD]	[TN]	[LX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[M\]	[PR]			
Full Na	ime (Last	t name fli	rst, if indiv	/idual)	······································										
Busine	ss or Re	sidence /	Address (I	Number a	and Street	, City, Sta	ite, Zip Co	ode)							
Name	of Assoc	iated Bro	ker or De	aler											
							cit Purcha	sers		r	1 All States				
					•		(DE)	rnei	rei 1	I CAI	-	(ID)			
												-			
[RI]	[SC]	[SD]	[TN]	[XT]	ָנדטן	[\frac{1}{2}]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Na	ame (Las	t name fi	rst, if indiv	/idual)											
Busine	ss or Re	sidence /	Address (i	Number a	and Street	, City, Sta	ite, Zip Co	ode)							
Name	Answer also has paper and, or locate the sealer intended to Seal, or Indenescental Intendency Column 2, if filling under ULOE.  2. What is the minimum investment that will be accepted from any individual?														
							cit Purcha	sers		ſ	1 All States				
							(DE)	(DC1	(FL)		-	(IDI			
										-					
[MT]				-	-							-			
[RI]										• -					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already

Aggregate Amount Already Type of Security Offering Price Sold 0 ٥ Debt ..... Equity ..... [ ] Common [ ] Preferred Convertible Securities (including warrants) ...... 0 \$ 0 \$<u>75,000,000</u> \$51,293,610\_ Partnership Interests ..... Other (Specify 0 \$\_\_0 \_\_)...... \$ 75,000,000 \$ 51,293,610 **...** Total ..... Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases \$ 51,293,610 70 Accredited Investors ..... Non-accredited Investors ..... Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. **Dollar Amount** Type of Security Type of offering Sold Rule 505 ..... Regulation A..... Rule 504 ..... Total ..... 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... [] Printing and Engraving Costs ..... \$ 1,000\_ [X] Legal Fees [X] \$ 30,000 Accounting Fees ..... [] Engineering Fees ..... [] Sales Commissions (specify finders' fees separately) ...... [] Other Expenses (identify) \_\_\_\_ [] Total ..... [X] \$ 31,000

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." .............

\$<u>51,262,610</u>

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Salaries and fees
Purchase of real estate
Purchase, rental or leasing and installation of machinery and equipment
Construction or leasing of plant buildings and facilities
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)
Repayment of indebtedness
Norking capital
Other (specify): Investment activities
Column Totals
Column Totals
Total Payments Listed (column totals added)

Payments to Officers,	
Directors, &	Payments To
Affiliates	Others
[]\$	[]\$
[]\$	
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[ ]\$	
	[X] \$ 51,262,610
[]\$	[]\$
[]\$	
[X]\$ <u>-</u>	<u>51,262,610</u>

D.		:n	0	AI.	CI	CI	M.	۸7	71	IK	3	=
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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Lazarus Investment Partners LLLP	Juti Q	2   12   0 4 February 12, 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Justin B. Borus	Manager of Lazarus Management Company LLC, Gen	eral Partner

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE		
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No
See Appendix, Column 5, for state response.	r 1	[×]

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Sig	mature La Bound	Date フ / (2/04
Lazarus Investment Partners LLLP	$\prod$		February 12, 2004
Name of Signer (Print or Type)	TW	e (Print or Type)	
Justin B. Borus	Ma	nager of Lazarus Management Company LLC, General Partne	er

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

-	_	-		ľ

1 1	2 3					4		1	5		
			Type of					under	ification State		
	Intend to		security and						(if yes,		
	non-acc		aggregate offering price		Type of	investor and		attach explanation of			
	Sta		offered in state		amount pu	rchased in State					
		Item 1)			(Part	C-Item 2)		waiver granted) (Part E-Item 1)			
				Number of Accredited		Number of Non-Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR			D-dbin								
CA		X	Partnership Interest	10	\$10,345,022	0	0		X		
СО		X	Partnership Interest	49	\$35,920,858	0	0		×		
СТ		X	Partnership Interest	1	\$250,000	0	0		X		
DE											
DC	CONTRACTOR CONTRACTOR CONTRACTOR					and the second and th					
FL		X	Partnership Interest	2	\$395,000	0	0		X		
GA											
HI						anner de la company de la comp					
ID											
IL		X	Partnership Interest	2	\$2,750,000	0	0		X		
IN											
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KS							AND THE PROPERTY OF THE PROPER				
KY											
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ME								1			
MD								<u> </u>			
MA								<u> </u>			
MI		<b>_</b>									
MN								<u> </u>			
MS								<u> </u>			
МО											

1	2		3	4				5	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state	Type of investor and amount purchased in State				Disqualification under State ULOE (if yes, attach explanation of waiver granted)	
			(Part C-Item 1)	(Part C-Item 2)				(Part E-Item 1)	
State		No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT		***************************************							
NE									
NV							**************************************		
NH									
NJ			D						
NM		X	Partnership Interest	1	\$275,000	0	0		Х
NY		Х	Partnership Interest	2	\$600,000	0	0		х
NC									
ND									
ОН							Score Control of the		
OK									
OR									
PA									
RI		×	Partnership Interest	1	\$250,000	0	0		×
SC									
SD									
TN			and the second section of the second						
TX		X	Partnership Interest	1	\$257,730	0	0		X
UT					and the second s				
VT									
VA									
WA								<u> </u>	
WV									
WI		ļ							
WY								<u> </u>	
PR					od - ndingi jiji ni muung kaga wandi jijikaa mandayahaa kada kada kada ka		and the second s	<u> </u>	

<sup>\*\*</sup>The issuer has also sold partnership interests to one investor in the United Kingdom for an aggregate offering price of \$250,000.